



## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/690,158
		Filing Date	October 16, 2003
		First Named Inventor	Mark A. Michalicek
		Art Unit	2891
		Examiner Name	Douglas M. Menz
Total Number of Pages in this Submission	6	Attorney Docket Number	AFD 623

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to a Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts / Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		There is no fee associated with this filing.

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT		
Firm or Individual Name	GERALD B. HOLLINS	RECEIVED OIPE/IAP
Signature	<i>Gerald B. Hollins</i>	JAN 30 2006
Date	19 January 2006	

### CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

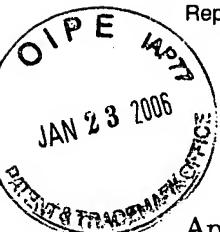
Signature

*Gerald B. Hollins*

Typed or printed name

GERALD B. HOLLINS

1/19/06



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No. : 10/690,158 Confirmation No. : 6032  
Applicant(s) : Mark A. Michalicek  
Filed : October 16, 2003  
TC/AU : 2891  
Examiner : Douglas M. Menz  
Docket No. : AFD 623  
Customer No. : 26902

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

Sir:

In response to the Examiner Action of 15 November 2005, please amend the above-identified application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.